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CONFIRMATION NO. 1236

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.							
10/615,986	07/10/2003	710	2629	IMM099C (1103 1760.2)							
RULE 345											
APPLICANTS Louis B. Rosenberg, San Jose, CA; James R. Riegel, Santa Clara, CA; ** CONTINUING DATA ***** This application is a CON of 10/213,940 08/06/2002 PAT 7,148,875 which is a CON of 09/487,737 01/19/2000 PAT 6,429,846 which is a CIP of 09/467,309 12/17/1999 PAT 6,563,487 which is a CIP of 09/156,802 09/17/1998 PAT 6,184,868 and is a CIP of 09/103,281 06/23/1998 PAT 6,088,019 and is a CIP of 09/253,132 02/18/1999 PAT 6,243,078 ** FOREIGN APPLICATIONS ***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/06/2003											
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and <u>/ABBAS I</u> <u>ABDULSELAM/</u> Acknowledged <u>Examiner's Signature</u>	<input type="checkbox"/> Met after Allowance <u>Initials</u>	STATE OR COUNTRY CA	SHEETS DRAWINGS 5	TOTAL CLAIMS 24 9	INDEPENDENT CLAIMS 3 1						
ADDRESS WOMBLE CARLYLE SANDRIDGE & RICE, PLLC ATTN: PATENT DOCKETING P.O. BOX 7037 ATLANTA, GA 30357-0037 UNITED STATES											
TITLE Haptic feedback for touchpads and other touch controls											
FILING FEE RECEIVED 768	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1" style="width: 100%; margin-top: 5px;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>					<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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